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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/590,738			ing Date 01/2006	To be Mailed
APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY □ OR SMALL ENTITY OR SMALL ENTITY											
	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		ı	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A		N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A		N/A		l	N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =		•		X \$ =		1	X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 tional 50 :	er, the applic for small ent sheets or frac	wings exceed 100 ation size fee due ity) for each ation thereof. See 37 CFR 1.16(s).						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						ı			l		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY CLAMS HIGHEST											
AMENDMENT	05/27/2011	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	* 3	Minus	20	= 0		x s =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	 3	- 0	l	X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
_							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())		Minus		-	l	x s =		OR	x s =	
M	Independent (37 CFR 1 16(h))		Minus	***	-]	x s =		OR	x s =	
Ä	Application Size Fee (37 CFR 1.16(s))]			l		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR		
* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.								estrument Ev	OR	TOTAL ADD'L FEE	
"I the derity in column 1 si less than the entry in column 2, white 0 in column 3. Legal Instrument Examiner: "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "The "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "The "Highest Number Proviously Paid For IR THIS SPACE is less than 1, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 10, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than 3, onter "3". "If the "Highest Number Proviously Paid For IR THIS SPACE is less than											

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO) to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete in localizing application from to the USPTO. Time will vary depending, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this long and or suggestion for individual pits which, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandriu, W. 22313-1450, D.O. NTSND) FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.